

In re Application of

Marcy Lynn Daniel et al.

Serial No.

10/717,231

Filing Date

November 19, 2003

Socks Having Match Indicators

Title

Examiner

Alissa L. Hoev

Group Art Unit

3765

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## REQUEST FOR EXTENSION OF TIME PURSUANT TO 37 CFR 1.136(a)

Dear Sir:

Applicant respectfully requests a two month extension of time in which to respond to the Official Action mailed September 29, 2005, in the above-identified application. This extension of time will extend the period for filing to expire on February 28, 2006.

Enclosed is a credit card form authorizing a charge of \$450.00 for the fee for a two month extension of time. The Commissioner is also hereby authorized to charge any additional fees required by this action, or credit any overpayment, to Deposit Account No. 16-1435. A duplicate of this sheet is enclosed for that purpose.

The Office is respectfully invited to contact J. Michael Boggs at (336) 747-7536, to discuss any matter relating to this application.

Respectfully submitted,

Reg. No. 46,563

Kilpatrick Stockton LLP 1001 West Fourth Street Winston-Salem, NC 27101 (336) 747-7536 (336) 734-2632 (facsimile) 41872-287263 9167623.1

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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		Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known			
OF	FEE TRANSMITTAL			Application Number	Number 10/717,231			
101P				Filing Date	November 19, 2003			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	TOFFY 2005		First Named Inventor Marcy Lynn Danie		el et al.			
		entity sta	tus. See 37 CFR 1.27	Examiner Name	Alissa L. Hoey			
THE				Art Unit	3765			
AND AND A STATE OF THE PARTY OF	TAL AMOUNT OF PAYM	MENT	(\$) 450.00	Attorney Docket No.	41872-287263			
	METHOD OF PAYMENT (check all that apply)							
	☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : ☐ Deposit Account Deposit Account Number: 16-1435 ☐ Deposit Account Name: Kilpatrick Stockton LLP							
•	For the above-iden	tified dep	osit account, the Director is	s hereby authorized to:	(check all that ap	ply)		
	Charge fee(s	s) indicate	ed below	☐ Cha	rge fee(s) indicate	d below, excep	t for the filing fee	
•	Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							edit card	
	FEE CALCULATION							
	1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
		FILING	FEES SI			NATION FEES		
	_		Small Entity	Small Entit		Small Entity		
	Application Type	E /&\						
		<u>Fee (\$)</u>		<u>ee(\$)                                   </u>	<u>Fee(\$)</u>	Fee(\$)	Fees Paid (\$)	
		300	150 50		<u>Fee(\$)</u> 200	Fee(\$) 100	Fees Paid (\$)	
	Utility			250			Fees Paid (\$)	
	Utility Design	300	150 50	250 00 50	200	100	Fees Paid (\$)	
	Utility Design Plant	300 200	150 50 100 10	250 00 50 00 150	200 130	100 65	Fees Paid (\$)	
	Utility Design Plant Reissue	300 200 200	150 50 100 10 100 30 150 50	250 00 50 00 150	200 130 160	100 65 80	Fees Paid (\$)	
	Utility Design Plant Reissue	300 200 200 300 200	150 50 100 10 100 30 150 50	250 00 50 00 150 00 250	200 130 160 600	100 65 80 300 0	Fees Paid (\$)  Small Entity	
	Utility Design Plant Reissue Provisional 2. EXCESS CLAIM FEES Fee Description	300 200 200 300 200 8	150 50 100 10 100 30 150 50	250 00 50 00 150 00 250	200 130 160 600	100 65 80 300 0	Small Entity Fee (\$)	
	Utility Design Plant Reissue Provisional  2. EXCESS CLAIM FEE Fee Description Each claim over 20 (inclu	300 200 200 300 200 <b>S</b> ading Rei	150 50 100 10 100 30 150 50 100	250 00 50 00 150 00 250	200 130 160 600	100 65 80 300 0 Fee (\$)	Small Entity Fee (\$) 25	
	Utility Design Plant Reissue Provisional  2. EXCESS CLAIM FEES Fee Description Each claim over 20 (inclued) Each independent claim of	300 200 200 300 200 <b>S</b> ading Rei	150 50 100 10 100 30 150 50 100	250 00 50 00 150 00 250	200 130 160 600	100 65 80 300 0 Fee (\$) 50 200	Small Entity Fee (\$) 25 100	
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20 or HP=	x		=		<u>Fee (\$)</u>	Fee Paid (\$)
HP = highest number of to	tal claims paid for, if great	ater than 20.				
<u>Indep. Claims</u>	Extra Claims	Fee(\$)		Fee Paid (\$)		
3 or HP=	x		=			
HP = highest number of in	dependent claims paid for	or, if greater t	han 3.			
3. APPLICATION SIZE I	FEE					
If the specification and dra	awings exceed 100 sh	neets of pap	er (exc	cluding electronically filed seq	quence or computer	
				lue is \$250 (\$125 for small ent	ity) for each additional 50	
1		3 41/ 1/11/	~ ·	125 OED 1 144 \		

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Extension of Time 450.00

SUBMITTED BY							
Signature	a. Michael Boggy	Registration No. (Attorney/Agent) 46,563	Telephone	(336) 747-7536			
Name (Print/Type)	Junichael Boggs U0		Date 2	28/06			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.